

Fill in this information to identify the case

Debtor name Blue Sky Events, LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number (if known) 20-10683-KHK

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets -- Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. <u>Capital One Bank</u>	<u>Checking account</u>	<u>1</u> <u>2</u> <u>2</u> <u>1</u>	<u>\$62.00</u>
------------------------------	-------------------------	-------------------------------------	----------------

4. Other cash equivalents (Identify all)

Name of institution (bank or brokerage firm)

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$62.00

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below.

Debtor **Blue Sky Events, LLC**
NameCase number (if known) **20-10683-KHK**Current value of
debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. **Deposit with Landlord [2400 Building, LLC]** **\$13,012.82****8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. **Pre-paid insurance premiums for auto insurance and business liability** **\$1,709.46****9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$14,722.28**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes. Fill in the information below.

Current value of
debtor's interest**11. Accounts receivable**11a. 90 days old or less: _____ = → _____
face amount doubtful or uncollectible accounts11b. Over 90 days old: _____ = → _____
face amount doubtful or uncollectible accounts**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$0.00**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes. Fill in the information below.

Valuation method
used for current valueCurrent value of
debtor's interest**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$0.00**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes. Fill in the information below.

Debtor Blue Sky Events, LLC Case number (if known) 20-10683-KHK
Name

General description	Date of the last physical inventory MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
21. Finished goods, including goods held for resale				
22. Other inventory or supplies				

Catered Event Goods	Valued through Craig's Li	\$750.00
---------------------	---------------------------	----------

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

\$750.00**24. Is any of the property listed in Part 5 perishable?**
☒ No
☐ Yes
25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?
☒ No
☐ Yes. Book value _____ Valuation method _____ Current value _____
26. Has any of the property listed in Part 5 been appraised by a professional within the last year?
☒ No
☐ Yes
Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?**
☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops--either planted or harvested			
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$0.00**34. Is the debtor a member of an agricultural cooperative?**
☐ No
☐ Yes. Is any of the debtor's property stored at the cooperative?
☐ No
☐ Yes
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?
☐ No
☐ Yes. Book value _____ Valuation method _____ Current value _____
36. Is a depreciation schedule available for any of the property listed in Part 6?
☐ No
☐ Yes
37. Has any of the property listed in Part 6 been appraised by a professional within the last year?
☐ No
☐ Yes

Debtor Blue Sky Events, LLC
NameCase number (if known) 20-10683-KHK**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
- ☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
Miscellaneous office furniture		Valued through Craig's I	\$500.00
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
Miscellaneous equipment		Valued through Craig's I	\$500.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$1,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
- ☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 2016 Ford Transit Van		On-line value	\$14,000.00
47.2. 2017 Ford E-Series		On-line	\$27,000.00
47.3. 2013 Jeep Cherokee		Online	\$8,000.00
47.4. 1990 GMC Van		Scrap Value	\$150.00
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1. 2008 Roadmaster Triple Axle		Listed Value	\$8,000.00
49. Aircraft and accessories			

Debtor Blue Sky Events, LLC
NameCase number (if known) 20-10683-KHK**50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**Miscellaneous EquipmentDebtor's Value\$20,000.00**51. Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$77,150.00**52. Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property
 Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.

Nature and extent of debtor's interest in property

Net book value of debtor's interest
 (Where available)

Valuation method used for current value

Current value of debtor's interest

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$0.00**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☐ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 10: Intangibles and Intellectual Property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description

Net book value of debtor's interest
 (Where available)

Valuation method used for current value

Current value of debtor's interest

60. Patents, copyrights, trademarks, and trade secrets**61. Internet domain names and websites****62. Licenses, franchises, and royalties****63. Customer lists, mailing lists, or other compilations**Customer listUnknown\$0.00

Debtor Blue Sky Events, LLC Case number (if known) 20-10683-KHK
Name**64. Other intangibles, or intellectual property****65. Goodwill**Goodwill Unknown \$0.00**66. Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00**67. Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐
- No
-
- ☒
- Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒
- No
-
- ☐
- Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒
- No
-
- ☐
- Yes

Part 11: All other assets**70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐
- No. Go to Part 12.
-
- ☒
- Yes. Fill in the information below.

Current value of
debtor's interest**71. Notes receivable**

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities**74. Causes of action against third parties (whether or not a lawsuit has been filed)****75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims****76. Trusts, equitable or future interests in property****77. Other property of any kind not already listed** Examples: Season tickets, country club membershipOperating Lease UnknownEquipment lease UnknownEquipment Lease Unknown**78. Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00**79. Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☒
- No
-
- ☐
- Yes

Debtor **Blue Sky Events, LLC**
NameCase number (if known) **20-10683-KHK****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$62.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$14,722.28</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$750.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$1,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$77,150.00</u>	
88. Real property. <i>Copy line 56, Part 9.....</i> →		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+\$0.00</u>	
91. Total. Add lines 80 through 90 for each column. 91a.	<u>\$93,684.28</u>	91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....		<u>\$93,684.28</u>

Fill in this information to identify the case:

Debtor name Blue Sky Events, LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number 20-10683-KHK
(if known)

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

<p>2.1</p>	<p>Creditor's name <u>CarMax</u></p> <p>Creditor's mailing address <u>Box 3174</u></p> <p><u>Milwaukee WI 53201</u></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred <u>7/2018</u></p> <p>Last 4 digits of account number <u>3 4 5 6</u></p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien <u>2013 Jeep Cherokee</u></p> <p>Describe the lien <u>Agreement</u></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><u>\$15,659.37</u></p>	<p><u>\$8,000.00</u></p>
-------------------	---	--	---------------------------	--------------------------

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$58,622.08

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 1: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
 Do not deduct the
 value of collateral.

Column B
**Value of collateral
 that supports
 this claim**

2.2	Creditor's name Ford Motor Credit	Describe debtor's property that is subject to a lien 2016 Fort Transit Van	\$16,283.06	\$14,000.00
	Creditor's mailing address Box 220564	Describe the lien Agreement		
	Pittsburgh PA 15257	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred 12/2017	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Last 4 digits of account number 0 3 4 3			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

2.3	Creditor's name Ford Motor Credit	Describe debtor's property that is subject to a lien 2017 Ford E-Series	\$26,679.65	\$27,000.00
	Creditor's mailing address Box 220564	Describe the lien Agreement		
	Pittsburgh PA 15257	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known	Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred 6/2018	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Last 4 digits of account number 6 0 7 0			
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input checked="" type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

1) Ford Motor Credit; 2) Ford Motor Credit.

☐ Yes. The relative priority of creditors is specified on lines _____

Fill in this information to identify the case:

Debtor Blue Sky Events, LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number 20-10683-KHK
(if known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address <u>Adela Mahmutovic and Cezar Bagonton</u> <u>211 Lake Club Ct.</u> <u>Unit 205</u> <u>Charlottesville</u> <u>VA</u> <u>22092</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>7</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Deposit for Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$20,117.89</u> <u>\$3,025.00</u>

2.2 Priority creditor's name and mailing address <u>Alina Czaplicki and Bryan King</u> <u>1021 S. Barton St.</u> <u>Unit 120</u> <u>Arlington</u> <u>VA</u> <u>22204</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>7</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Deposit for Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,555.50</u> <u>\$3,025.00</u>
--	--	--

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.3 Priority creditor's name and mailing address**Amanda Olsen and Konnor Fulk****2409 Arlington Blvd.****Apt. 101****Arlington VA 22201**

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Deposit for Services

Is the claim subject to offset?

- ☒ No
☐ Yes

\$20,911.30**\$3,025.00****2.4** Priority creditor's name and mailing address**Chris Fagoli****1315 N. Ode St.****Apt 714****Arlington VA 22209**

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Deposit for Services

Is the claim subject to offset?

- ☒ No
☐ Yes

\$933.32**\$933.32****2.5** Priority creditor's name and mailing address**Courtney Nurre****5016 Stine Haven Dr.****Annandale VA 22003**

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Deposit for Services

Is the claim subject to offset?

- ☒ No
☐ Yes

\$1,268.04**\$1,268.04**

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.6 Priority creditor's name and mailing address**Internal Revenue Service****Box 7346**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$66,810.00**\$63,026.00****Philadelphia PA 19101-7346**

Basis for the claim:

941 Taxes

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(**8**)**2.7** Priority creditor's name and mailing address**Janay Rickwalder****12277 Sherborne St.**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$2,410.30**\$2,410.30****Bristow VA 20136**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(**7**)**2.8** Priority creditor's name and mailing address**Kate Murphy****2009 N. 14th St.****Unit 616**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$16,877.85**\$3,025.00****Arlington VA 22201**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(**7**)

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.9 Priority creditor's name and mailing address**Kim Ellsworth-Evans****7073 Glanaman Way****Warrenton VA 20186**

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Deposit for Services

Is the claim subject to offset?

- ☒ No
☐ Yes

\$3,179.46**\$3,179.46****2.10** Priority creditor's name and mailing address**Kim Mineo****10 Pine Creek La.****Houston TX 77055**

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Deposit for Services

Is the claim subject to offset?

- ☒ No
☐ Yes

\$5,565.89**\$3,025.00****2.11** Priority creditor's name and mailing address**Laura Poole****258 Spotted Tavern Rd.****Fredericksbrg VA 22406**

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Deposit for Services

Is the claim subject to offset?

- ☒ No
☐ Yes

\$600.00**\$600.00**

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.12 Priority creditor's name and mailing addressAs of the petition filing date, the claim is: *Check all that apply.***\$1,119.00****\$1,119.00****Lorna Bradley**

- ☐ Contingent
☐ Unliquidated
☒ Disputed

191 Alpin Drive, SE

Basis for the claim:

Deposit for Services**Leesburg VA 20175**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(**7**)**2.13** Priority creditor's name and mailing addressAs of the petition filing date, the claim is: *Check all that apply.***\$5,948.99****\$3,025.00****Marlene Free**

- ☐ Contingent
☐ Unliquidated
☒ Disputed

9412 Abingdon Ct.

Basis for the claim:

Deposit for Services**Manassas VA 20109**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(**7**)**2.14** Priority creditor's name and mailing addressAs of the petition filing date, the claim is: *Check all that apply.***\$215.87****\$215.87****Maureen Horan**

- ☐ Contingent
☐ Unliquidated
☒ Disputed

9816 Picken Pl.

Basis for the claim:

Deposit for Services**Manassas Park VA 20111**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(**7**)

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.15 Priority creditor's name and mailing address**Megan Posey and Jordan Wiley****1662 Skyfield La., NW****Unit Q-101**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$9,756.79**\$3,025.00****Issaquail WA 98027**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)**2.16** Priority creditor's name and mailing address**Melanie Corcoran****1000 Cordova Pl.****Unit 331**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$1,878.22**\$1,878.22****Santa Fe NM 87505**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)**2.17** Priority creditor's name and mailing address**Morgan McMahill****8972 Appaloosa Ct.**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$8,091.27**\$3,025.00****Rancho Cucamonga CA 91737**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.18 Priority creditor's name and mailing address**Natalie Dill****675 Hunter St.**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$843.05**\$843.05****Burnsville NC 28714**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)**2.19** Priority creditor's name and mailing address**Pat Collet****8966 Bella Verde Ct.**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$2,098.75**\$2,098.75****Myrtle Beach SC 29579**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)**2.20** Priority creditor's name and mailing address**Patrik Dyberg****23334 Wildwood La.**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$2,453.50**\$2,453.50****Middleburg VA 20188**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.21 Priority creditor's name and mailing address**Stacy Deluke Prince****23318 Foxcroft Rd.**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$2,214.55**\$2,214.55****Middleburg VA 20188**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)**2.22** Priority creditor's name and mailing address**Stephanie Paul and Dustin Knight****11300 Fair Wind Way**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$11,756.82**\$3,025.00****Reston VA 20190**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)**2.23** Priority creditor's name and mailing address**Tori Selfe and Justin Montgomery****223 Brittany Farms Rd.****Unit D**As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$6,318.74**\$3,025.00****New Britain CT 06053**

Basis for the claim:

Deposit for Services

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(7)

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.24 Priority creditor's name and mailing addressAs of the petition filing date, the claim is: *Check all that apply.***\$547,918.00****\$238,410.00****Virginia Department of Taxation****Box 1880**

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Richmond VA 23218

Basis for the claim:

Sales Taxes

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(**8**)

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">3.1</div> Nonpriority creditor's name and mailing address <u>2400 Building LLC</u> <u>c/o Odin Feldman Pittleman</u> <u>1775 Wiehle Ave., Suite 400</u> <u>Reston</u> <u>VA</u> <u>20190</u> Date or dates debt was incurred <u>03/2018</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$141,825.68</u>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">3.2</div> Nonpriority creditor's name and mailing address <u>2400 Building LLC</u> <u>c/o Odin Feldman Pittleman</u> <u>1775 Wiehle Ave., Suite 400</u> <u>Reston</u> <u>VA</u> <u>20190</u> Date or dates debt was incurred <u> </u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Build-out Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">3.3</div> Nonpriority creditor's name and mailing address <u>ACRS-ASOA</u> <u>Attn: Pura Valdez</u> <u>4000 Legato Rd., Unit 700</u> <u>Fairfax</u> <u>VA</u> <u>22033</u> Date or dates debt was incurred <u> </u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Deposit for Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$657.02</u>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">3.4</div> Nonpriority creditor's name and mailing address <u>Almost Heaven/Culligan Water</u> <u>14601 Colonel Ct.</u> <u>Manassas</u> <u>VA</u> <u>20110</u> Date or dates debt was incurred <u> </u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$390.00</u>

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.5</div> Nonpriority creditor's name and mailing address <u>Black Horse Inn</u> <u>8393 Meetz Rd.</u> <u>Warrenton</u> <u>VA</u> <u>20187</u> Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Deposit for Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$83.71</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.6</div> Nonpriority creditor's name and mailing address <u>Blaze Broadband</u> <u>6670 Whiskey Bottom Rd.</u> <u>Laurel</u> <u>MD</u> <u>20733</u> Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,119.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.7</div> Nonpriority creditor's name and mailing address <u>Boy Scouts of America - NCAC</u> <u>Attn: Jenna Welle</u> <u>9190 Rockville Pike</u> <u>Bethesda</u> <u>MD</u> <u>20184</u> Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Deposit for Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,277.54</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.8</div> Nonpriority creditor's name and mailing address <u>Capital One</u> <u>Exception Department</u> <u>2012 Corporate la., Suite 108</u> <u>Naperville</u> <u>IL</u> <u>60563</u> Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$18,057.00</u>

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,200.00
	Capital Restaurant Resources, LLC	<input type="checkbox"/> Contingent	
	707 8th St., SE	<input type="checkbox"/> Unliquidated	
	Suite 200	<input type="checkbox"/> Disputed	
	Washington DC 20003	Basis for the claim:	
		Supplies	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$21,231.00
	Coastal Sunbelt Produce	<input type="checkbox"/> Contingent	
	9001 Whiskey Bottom Dr.	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Laurel MD 20733	Basis for the claim:	
		Supplies	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$24,875.00
	COS Events Management LLC	<input type="checkbox"/> Contingent	
	Box 239	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Rockville MD 20848	Basis for the claim:	
		Services Rendered	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.12	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,884.17
	Demolition Services, Inc.	<input type="checkbox"/> Contingent	
	Attn: Melissa Feather	<input type="checkbox"/> Unliquidated	
	16377 Bennet Rd.	<input checked="" type="checkbox"/> Disputed	
	Culpepper VA 22701	Basis for the claim:	
		Deposit for Services	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.13</div> Nonpriority creditor's name and mailing address Don & Co. 2562 Paysphere Cir. Chicago IL 60674 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Equipment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,980.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.14</div> Nonpriority creditor's name and mailing address Fauquier County Public Library Attn: Terri Garoznik 11 Winchester St. Warrenton VA 20186 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Deposit for Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,447.50
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.15</div> Nonpriority creditor's name and mailing address Firm 70, LLC 2833 Spy Glass Dr. Chaska MN 55318 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Consulting Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,060.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.16</div> Nonpriority creditor's name and mailing address Fund So Fast Recovery 122 E. 42nd St. Suite 2112 New York, N 10168 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,330.00

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.17</div> Nonpriority creditor's name and mailing address Fundbox 300 Montgomery St. San Francisco CA 94104 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,383.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.18</div> Nonpriority creditor's name and mailing address George Mason University 4400 University Dr. MS 4C1 Fairfax VA 22030 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Rendered Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,300.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.19</div> Nonpriority creditor's name and mailing address International Gourmet Foods 7529 Fullerton Rd. Springfield VA 22153 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplies Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,989.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.20</div> Nonpriority creditor's name and mailing address John Velez 9131 Panther Falls Way Bristow VA 20136 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$53,843.00

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.21</div> Nonpriority creditor's name and mailing address Leonard Paper Company 725 N. Haven St. Baltimore MD 21205 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplies Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,590.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.22</div> Nonpriority creditor's name and mailing address Magnolia Plumbing 600 Gallatin St., NE Washington DC 20017 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Rendered Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,070.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.23</div> Nonpriority creditor's name and mailing address Metropolitan Restaurant Brokers LLC 13701 Stonedale Ct. Clifton VA 20124 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Brokerage Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.24</div> Nonpriority creditor's name and mailing address NV Commercial, Inc. Attn: Nicole PAssmore 8230 Leesburg Pike, Suite 620 Vienna VA 22182 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Deposit for Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,112.93

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.25</div> Nonpriority creditor's name and mailing address PAYCHEX 4015 Meeting Way Suite 110 High Point NC 27226 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Services Rendered Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.26</div> Nonpriority creditor's name and mailing address Performance Food Group 1333 Avondale Rd. New Windsor MD 21776 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplies Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,500.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.27</div> Nonpriority creditor's name and mailing address Smart Beginnings of Greater Prince Willi Attn: Dawn Davis Box 389 Manassas VA 20108 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Deposit for Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,161.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.28</div> Nonpriority creditor's name and mailing address The Hartford Box 660916 Dallas, TX 75266 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Premiums/Charges Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,500.00

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.29</div> Nonpriority creditor's name and mailing address TOAST Capital 401 Park St. Suite 801 Boston MA 02215 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,905.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.30</div> Nonpriority creditor's name and mailing address US Food Service 1994 Livingsgston Rd. Manassas VA 20109 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplies Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,134.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.31</div> Nonpriority creditor's name and mailing address USA Produce & Seafood 1152 Martinsburg Pike Winchester VA 22603 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplies Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,033.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.32</div> Nonpriority creditor's name and mailing address Virginia Systems & Technology Attn: Jamie Rich 6801 Kennedy Rd., Suite 301 Vint Hill VA 20187 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Deposit for Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,545.41

Debtor **Blue Sky Events, LLC**Case number (if known) **20-10683-KHK****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.33</div> Nonpriority creditor's name and mailing address Vulcan Materials Attn: Beth Moore 5485 Afton La. Warrenton VA 20186 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Deposit for Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,556.27
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.34</div> Nonpriority creditor's name and mailing address Washington Lamb 7963 Conell Ct. Lorton VA 22079 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Supplies Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,639.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.35</div> Nonpriority creditor's name and mailing address Wetland Studies & Solutions, Inc. Attn: Susanna Headly 5300 Wellington Branch Dr., #100 Gainesville VA 20155 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Deposit for Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$427.42

Debtor Blue Sky Events, LLCCase number (if known) 20-10683-KHK**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.****Total of claim amounts****5a. Total claims from Part 1****5a. \$742,843.10****5b. Total claims from Part 2****5b. + \$433,106.65****5c. Total of Parts 1 and 2****5c. \$1,175,949.75**

Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name Blue Sky Events, LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number 20-10683-KHK Chapter 11
(if known)

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Operating Lease Contract to be ASSUMED	2400 Building LLC 7138 Farm Station Rd.
	State the term remaining	96 Months	
	List the contract number of any government contract		Vint Hill VA 20187
2.2	State what the contract or lease is for and the nature of the debtor's interest	Equipment Lease Contract to be ASSUMED	Easy Ice 925 W. Washington St. Suite 100
	State the term remaining	At-Will	
	List the contract number of any government contract		Marquette WI 49855
2.3	State what the contract or lease is for and the nature of the debtor's interest	Equipment lease Contract to be ASSUMED	Performance Food Service 1333 Avondale Rd.
	State the term remaining	24 Months	
	List the contract number of any government contract		New Windsor MD 21776

Fill in this information to identify the case:

Debtor name Blue Sky Events, LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number 20-10683-KHK
(if known)

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 Karen Baker	7146 Farm Station Rd. <small>Number Street</small> <hr/> Vint Hill VA 20187 <small>City State ZIP Code</small>	CarMax	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 Karen Baker	7146 Farm Station Rd. <small>Number Street</small> <hr/> Vint Hill VA 20187 <small>City State ZIP Code</small>	Ford Motor Credit	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 Karen Baker	7146 Farm Station Dr. <small>Number Street</small> <hr/> Vint Hill VA 20187 <small>City State ZIP Code</small>	Virginia Department of Taxation	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.4 Karen Baker	7146 Farm Station Dr. <small>Number Street</small> <hr/> Vint Hill VA 20187 <small>City State ZIP Code</small>	Internal Revenue Service	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor Name Blue Sky Events, LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number (if known): 20-10683-KHK

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets--Real and Personal Property (Official Form 206A/B)

1a. Real property: Copy line 88 from Schedule A/B.....	<u>\$0.00</u>
1b. Total personal property: Copy line 91A from Schedule A/B.....	<u>\$93,684.28</u>
1c. Total of all property Copy line 92 from Schedule A/B.....	<u>\$93,684.28</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D..... \$58,622.08

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F.....	<u>\$742,843.10</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....	<u>+ \$433,106.65</u>

4. Total liabilities

Lines 2 + 3a + 3b..... \$1,234,571.83

Fill in this information to identify the case and this filing:

Debtor Name Blue Sky Events, LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number 20-10683-KHK
(if known)

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets--Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206-Summary)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/17/2020
MM / DD / YYYY

X /s/ Karen Baker
Signature of individual signing on behalf of debtor

Karen Baker
Printed name
Manager
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Blue Sky Events, LLC

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number (if known) 20-10683-KHK

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply.

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:	From <u>01/01/2020</u> to <u>MM / DD / YYYY</u>	Filing date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	<u>\$208,657.00</u>
For prior year:	From <u>01/01/2019</u> to <u>MM / DD / YYYY</u>	<u>12/31/2019</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	<u>\$1,840,062.00</u>
For the year before that:	From <u>01/01/2018</u> to <u>MM / DD / YYYY</u>	<u>12/31/2018</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	<u>\$1,776,510.00</u>

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None

			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/2020</u> to <u>MM / DD / YYYY</u>	Filing date	_____	_____
For prior year:	From <u>01/01/2019</u> to <u>MM / DD / YYYY</u>	<u>12/31/2019</u> MM / DD / YYYY	_____	_____
For the year before that:	From <u>01/01/2018</u> to <u>MM / DD / YYYY</u>	<u>12/31/2018</u> MM / DD / YYYY	<u>Relocation Income</u>	<u>\$271,886.00</u>

Debtor **Blue Sky Events, LLC**
NameCase number (if known) **20-10683-KHK****Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Costal Sunbelt Produce Creditor's name 9001 Whiskey Bottom Dr. Street Laurel MD 20733 City State ZIP Code		\$15,605.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Performance Food Group Creditor's name 1333 Avondale Rd. Street New Windsor MD 21776 City State ZIP Code		\$11,575.91	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.3. US Food Service Creditor's name 11994 Linvingston Rd. Street Manassas VA 20109 City State ZIP Code		\$16,308.38	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. Insiders include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Debtor Blue Sky Events, LLC Case number (if known) 20-10683-KHK
Name

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity--within 1 year before filing this case.

☐ None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. Blue Sky Events LLC	Premises Padlock	<u>Virginia Department of Taxation</u> Name <u>11150 Fairfax Blvd.</u> Street <u>Suite 300</u>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number <u>VR 630-1-11805.1</u>		<u>Fairfax</u> <u>VA</u> <u>22030</u> City State ZIP Code	

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Debtor Blue Sky Events, LLC Case number (if known) 20-10683-KHK
Name**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

Who was paid or who received the transfer?	If not money, describe the property transferred	Dates	Total amount or value
11.1. <u>John P. Forest, II</u>		<u>March 3, 2020</u>	<u>\$2,500.00</u>
Address			
<u>11350 Random Hills Rd.</u>			
<small>Street</small>			
<u>Suite 700</u>			
<small>Suite</small>			
<u>Fairfax</u>	<u>VA</u>	<u>22030</u>	
<small>City</small>	<small>State</small>	<small>ZIP Code</small>	
Email or website address			
<u></u>			
Who made the payment, if not debtor?			
<u>Karen Baker</u>			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None**13. Transfers not already listed on this statement**

List any transfers of money or other property--by sale, trade, or any other means--made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy
14.1. <u>4171 Bludau Rd.</u>	From <u>April 2017</u> To <u>April 2018</u>
<small>Street</small>	
<u>Vint Hill</u>	<u>VA</u> <u>20187</u>
<small>City</small>	<small>State</small> <small>ZIP Code</small>

Debtor Blue Sky Events, LLC Case number (if known) 20-10683-KHK
Name**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- ☐ diagnosing or treating injury, deformity, or disease, or
- ☐ providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained _____
- Does the debtor have a privacy policy about that information?
- ☐ No.
- ☐ Yes.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?
- ☐ No. Go to Part 10.
- ☐ Yes. Fill in below:

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts, certificates of deposit, and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☐ None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. <u>The Fauquier Bank</u>				
Name		<input checked="" type="checkbox"/> Checking	<u>January 2020</u>	<u>\$1,397.40</u>
<u>Box 561</u>	XXXX- <u>3</u> <u>7</u> <u>7</u> <u>1</u>	<input type="checkbox"/> Savings		
Street		<input type="checkbox"/> Money market		
		<input type="checkbox"/> Brokerage		
		<input type="checkbox"/> Other _____		
<u>Warrenton</u>	<u>VA</u> <u>20186</u>			
City	State ZIP Code			

Debtor Blue Sky Events, LLC Case number (if known) 20-10683-KHK
Name

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.2. <u>The Fauquier Bank</u> Name	XXXX- <u>3</u> <u>6</u> <u>7</u> <u>1</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	<u>January 2020</u>	<u>\$4,220.00</u>
<u>Box 561</u> Street				
<u>Warrenton</u> <u>VA</u> <u>20186</u> City State ZIP Code				

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?

Include settlements and orders.

- ☒ No
☐ Yes. Provide details below.

Debtor **Blue Sky Events, LLC** Case number (if known) **20-10683-KHK**
Name

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Provide details below.

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address

Dates of service

26a.1. **Paulita Ramirez**

From **2017** To **2018**

Name

4372 Pierpoint La.

Street

The Plains

VA

20198

City

State

ZIP Code

Name and address

Dates of service

26a.2. **Anne McGregor**

From **2018** To **2019**

Name

329 Amber Cir.

Street

Warrenton

VA

20186

City

State

ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address

Dates of service

26b.1. **James Nazarday**

From **2018** To **2020**

Name

13902 Shadow Fox Ct.

Street

Gainesville

VA

20155

City

State

ZIP Code

Name and address

Dates of service

26b.2. **John Eckenrode**

From **2019** To **2020**

Name

Box 861665

Street

Vint Hill

VA

20187

City

State

ZIP Code

Debtor **Blue Sky Events, LLC** Case number (if known) **20-10683-KHK**
Name

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address

If any books of account and records are unavailable, explain why

26c.1. **Karen Baker**

Name

7146 Farm Station Rd.

Street

Vint Hill

City

VA

State

20187

ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. **Listeing Post LLC**

Name

7138 Farm Station Rd.

Street

Vint Hill

City

VA

State

20187

ZIP Code

Name and address

26d.2. **Metropolitan Restaurant Brokers**

Name

13701 Stonedale Ct.

Street

Clifton

City

VA

State

20124

ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No.

☒ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

Karen Baker

12/2019

\$20,000.00 / Liquidation

Name and address of the person who has possession of inventory records

27.1. **Karen Baker**

Name

7146 Farm Station Rd.

Street

Vint Hill

City

VA

State

20187

ZIP Code

Debtor Blue Sky Events, LLC Case number (if known) 20-10683-KHK
Name

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Karen Baker	7146 Farm Station Dr. Vint Hill, VA 20187	Member	100%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
------	---------	-------------------------------------	---

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. <u>Karen Baker</u> <small>Name</small> <u>7146 Farm Station Dr.</u> <small>Street</small> <u>Vint Hill</u> <u>VA</u> <u>20187</u> <small>City</small> <small>State</small> <small>ZIP Code</small>	\$40,000.00	2019	Salary
Relationship to debtor <u>Member</u>			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Debtor Blue Sky Events, LLC Case number (if known) 20-10683-KHK
Name

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/17/2020
MM / DD / YYYY

X /s/ Karen Baker Printed name Karen Baker
Signature of individual signing on behalf of the debtor

Position or relationship to debtor Manager

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No
☐ Yes